								Application or Docket Number					
	PATENT A	RD											
Effective January 1, 2003									FNSR/1001,04				
		CLAIMS AS	FILED - PART I (Column 1) (Column			mn 2)	-	SMALL ENTITY TYPE		OR	OTHER THAN		
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	BASIC FEE 375.00		OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			20 min	us 20=	* 6		1	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS				nus 3 =	* Ø			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=		OR	+280=		
* if	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL		OR	TOTAL	750	
	Cl	_AIMS AS A	MENDED - PART II					,			OTHER		
	and the state of the state of	(Column 1) CLAIMS	(Colum			(Column 3)	: 	SMALL		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	F CL AIM	<u> </u>	lΓ	X42=		OR	X84=		
	rino i Priesei	1 C	JLTIPLE DEPENDENT CLAI				¹ [+140=		OR	+280=		
	1	13	•				L. Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT: FEE		
		(Column 1)				(Column 3)				•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	T CL AINA	=	1 [X42=		OR	X84=		
<u> </u>	FINOT PRESE	NIATION OF W	ULTIPLE DEF	ENDEN	CLAIIVI		1	+140=		OR	+280=		
							L.	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)		DD11.1 QL		•	7,0011,120		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	Jſ	X\$ 9=		OR	X\$18≃		
ME	Independent	*	Minus	***]=]	X42=		l	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╛┞			OR	 		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE													
	The "Highest Nun						er four	nd in th ap	propriate bo	x in co	olumn 1.		